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PTO/SB/05 (03-01)
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UTILITY PATENT APPLICATION TRANSMITTAL

Attorney Docket No.			
First Inventor		AM GODMAN	
Title	INTERNE		

(Only for new nonprovisional applications under 37 CFR 1.53(b)) Express Mail Label No. Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: **Box Patent Application** See MPEP chapter 600 concerning utility patent application contents. Washington, DC 20231 Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) Specification [Total Pages (preferred arrangement set forth below) 3. Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention Statements verifying identity of above copies - Brief Summary of the Invention - Brief Description of the Drawings (if filed) ACCOMPANYING APPLICATION PARTS - Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) 37 CFR 3.73(b) Statement Power of Abstract of the Disclosure 10. Attorney (when there is an assignee) English Translation Document (if applicable) Drawing(s) (35 U.S.C. 113) [Total Sheets Copies of IDS Information Disclosure 5. Oath or Declaration [Total Pages Citations Statement (IDS)/PTO-1449 Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) (for continuation/divisional with Box 18 completed) Preliminary Amendment Return Receipt Postcard (MPEP 503) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR Nonpublication Request under 35 U.S.C. 122 16. 1.63(d)(2) and 1.33(b). (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of pnor application No :_ Prior application information: Examiner Group Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below (Insert Customer No. or Attach har code label he Name 3254 Address WASHING TON State City Zip Code 20007 Country ZOZ 333·3288 Telephone Fax 333°3266 Name (Print/Type) Registration No. (Attorney/Agent) Signature

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known FEE TRANSMITTAL Application Number Filing Date for FY 2002 ANN GOODMAN First Named Inventor Patent fees are subject to annual revision. **Examiner Name** Applicant claims small entity status. See 37 CFR 1.27 Group Art Unit **TOTAL AMOUNT OF PAYMENT** Attorney Docket No. METHOD OF PAYMENT (check all that apply) FEE CALCULATION (continued) Check Credit card Money 3. ADDITIONAL FEES Other None _arge Entity | Small Entity Deposit Account: Fee Fee Code (\$) Fee Paid Fee Fee Code (\$) Deposit Fee Description Account Number 105 130 205 65 Surcharge - late filing fee or oath Deposit Account Name Surcharge - late provisional filing fee or cover sheet 127 50 227 25 The Commissioner is authorized to: (check all that apply) 139 130 139 130 Non-English specification Charge fee(s) indicated below Credit any overpayments 147 2.520 147 2.520 For filing a request for ex parte reexamination Charge any additional fee(s) during the pendency of this application 112 920* 112 920* Requesting publication of SIR prior to Charge fee(s) indicated below, except for the filing fee Examiner action to the above-identified deposit account 113 1,840* Requesting publication of SIR after Examiner action 113 1.840 **FEE CALCULATION** Extension for reply within first month 115 110 215 55 1. BASIC FILING FEE 116 400 216 200 Extension for reply within second month Large Entity | Small Entity Fee Description Fee Fee Code (\$) 117 920 217 460 Extension for reply within third month Code (\$) Fee Paid Extension for reply within fourth month 118 1.440 218 720 Utility filing fee 201 370 101 740 370 128 1.960 228 980 106 330 206 165 Design filing fee Extension for reply within fifth month 219 160 119 320 107 510 207 255 Notice of Appeal Plant filing fee 108 740 208 370 120 320 220 160 Reissue filing fee Filing a brief in support of an appeal 114 160 214 80 Provisional filing fee 121 280 221 140 Request for oral hearing 138 1,510 138 1,510 Petition to institute a public use proceeding **SUBTOTAL (1)** (\$) 370 140 110 240 Petition to revive - unavoidable 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 141 1.280 241 640 Petition to revive - unintentional Fee from Fee Paid Extra Claims below 142 1,280 242 640 Utility issue fee (or reissue) Total Claims -20** 143 243 230 460 Design issue fee Independent Claims - 3** = 144 620 244 310 Plant issue fee Multiple Dependent 122 130 122 130 Petitions to the Commissioner 123 50 123 50 Processing fee under 37 CFR 1.17(q) Large Entity Small Entity 126 180 126 180 Submission of Information Disclosure Stmt Fee Description Code (\$) Code (\$) 581 581 40 40 Recording each patent assignment per 103 property (times number of properties) 18 203 9 Claims in excess of 20 102 84 202 42 740 Independent claims in excess of 3 146 246 370 Filing a submission after final rejection (37 CFR § 1.129(a)) 104 280 204 140 Multiple dependent claim, if not paid

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	ANN GOODMAN	Registration No. (Attomey/Agent)	Telephone	202 333-3288	
Signature	Ahr Sa		Date	12/7/01	

Other fee (specify)

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** Reissue independent claims

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For each additional invention to be

Request for expedited examination of a design application

Request for Continued Examination (R CE)

SUBTOTAL (3)

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examined (37 CFR § 1.129(b))

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